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CONFIDENTIAL
FACSIMILE TRANSMITTAL SHEET**DATE SENT:** November 22, 2004**DELIVER TO:**

Name: Examiner Jon Ouellette
Company: USPTO / GAU 3629
Phone No: 703-605-0662
Fax No: 703-872-9306

FROM: **Ramraj Soundararajan****YOUR FILE:** **09/658,632**

THERE WILL BE A TOTAL OF **21** PAGE(S) INCLUDING THIS COVER SHEET.
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In re Application of: **Megiddo et al.**Serial No.: **09/658,632**Group Art Unit: **3629**Filed: **9/8/2000**Examiner: **Jonathan P. Ouellette**Title: ***A System and Method for Improving the Effectiveness of Web Advertising***

PTO/SB/21 (08-03)

Approved for use through 07/31/2008. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/858,632	
	Filing Date	09/08/2000	
	First Named Inventor	Megiddo, Nimrod	
	Art Unit	3629	
	Examiner Name	J. Ouellette	
Total Number of Pages in This Submission	20	Attorney Docket Number	ARC92000028US1

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Continued Examination (RCE)
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Lacasse & Associates, LLC
Signature	<i>Ramraj Soudararaj</i>
Date	November 22, 2004

CERTIFICATE OF TRANSMISSION/MAILING

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Signature		Date

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PTO/5B/17 (10-03)

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FEE TRANSMITTAL for FY 2004		Complete if Known			
Effective 10/01/2003. Patent fees are subject to annual revision.		Application Number	09/658,632		
		Filing Date	9/8/2000		
		First Named Inventor	Megiddo, et al.		
		Examiner Name	J. Ouellette		
		Art Unit	3629		
		Attorney Docket No.	ARC92000029US1		
<input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27					
TOTAL AMOUNT OF PAYMENT		(\$1220.00)			
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)			
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None					
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 09-0441 Deposit Account Name: IBM CORPORATION					
The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee In the above-identified deposit account.					
1. BASIC FILING FEE		3. ADDITIONAL FEES			
Large Entity	Small Entity	Large Entity	Small Entity		
Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)		
Fee Description	Fee Description	Fee Description	Fee Description		
Fee Paid	Fee Paid	Fee Description	Fee Paid		
1001 790	2001 395	1051 130	2051 65	Surcharge - late filing fee or osh	
1002 350	2002 175	1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1003 550	2003 275	1053 130	2053 130	Non-English specification	
1004 790	2004 395	1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1005 150	2005 80	1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
		1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
		1251 110	2251 55	Extension for reply within first month	
		1252 430	2252 215	Extension for reply within second month	430
		1253 980	2253 490	Extension for reply within third month	
		1254 1,530	2254 765	Extension for reply within fourth month	
		1255 2,080	2255 1,040	Extension for reply within fifth month	
		1401 340	2401 170	Notice of Appeal	
		1402 340	2402 170	Filing a brief in support of an appeal	
		1403 300	2403 150	Request for oral hearing	
		1451 1,610	1451 1,610	Petition to institute a public use proceeding	
		1452 110	2452 65	Petition to revive - unavoidable	
		1453 1,370	2453 685	Petition to revive - unintentional	
		1501 1,370	2501 685	Utility issue fee (or reissue)	
		1602 490	2502 245	Design issue fee	
		1603 680	2603 330	Plant issue fee	
		1480 130	1480 130	Petitions to the Commissioner	
		1807 50	1807 50	Processing fee under 37 CFR 1.17(e)	
		1806 180	1806 180	Submission of Information Disclosure Stmt	
		8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
		1809 790	2809 395	Filing a submission after final rejection (37 CFR 1.129(a))	
		1810 790	2810 395	For each additional invention to be examined (37 CFR 1.129(b))	
		1801 790	2801 395	Request for Continued Examination (RCE)	790
		1802 900	1802 900	Request for expedited examination of a design application	
SUBTOTAL (1) (\$0.00)		Other fee (specify)			
Total Claims: 20 Independent Claims: 3 Multiple Dependent: 17		Extra Claims Fee from below: X Fee Paid:			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE					
Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)		
Fee Description	Fee Description	Fee Description	Fee Description		
Fee Paid	Fee Paid	Fee Description	Fee Paid		
1202 18	2202 9	9	Claims in excess of 20		
1201 88	2201 44	44	Independent claims in excess of 3		
1203 300	2203 150	150	Multiple dependent claim, if not paid		
1204 88	2204 44	44	**Reissue independent claims over original patent		
1205 18	2205 9	9	**Reissue claims in excess of 20 and over original patent		
SUBTOTAL (2) (\$0.00)					
* or number previously paid, if greater; For Reissues, see above					
		Reduced by Basic Filing Fee Paid			
		SUBTOTAL (3) (\$1220)			
SUBMITTED BY		Complete (if applicable)			
Name (Print/Type)	Ramraj Sounderajan	Registration No. (Attorney/Agent)	53832		
Signature	<i>Ramraj Sounderajan</i>	Telephone	(703) 838-7683		
		Date	11/22/04		

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FEE TRANSMITTAL for FY 2004		Complete if Known	
Effective 10/01/2003. Patent fees are subject to annual revision.		Application Number	09/658,632
		Filing Date	9/8/2000
		First Named Inventor	Mejiddo, et al.
		Examiner Name	J. Ouellette
		Art Unit	3829
		Attorney Docket No.	ARC92000029US1
<input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT		(\$) 1220.00	

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																									
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None																											
<input checked="" type="checkbox"/> Deposit Account																											
Deposit Account Number: 09-0441 Deposit Account Name: IBM CORPORATION																											
The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.																											
FEE CALCULATION																											
1. BASIC FILING FEE <table border="1" style="width: 100%; font-size: 0.7em;"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>1001 790 2001 395</td> <td></td> <td>Utility filing fee</td> <td></td> </tr> <tr> <td>1002 350 2002 175</td> <td></td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>1003 550 2003 275</td> <td></td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>1004 790 2004 385</td> <td></td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>1005 180 2005 80</td> <td></td> <td>Provisional filing fee</td> <td></td> </tr> </tbody> </table>		Large Entity	Small Entity	Fee Description	Fee Paid	1001 790 2001 395		Utility filing fee		1002 350 2002 175		Design filing fee		1003 550 2003 275		Plant filing fee		1004 790 2004 385		Reissue filing fee		1005 180 2005 80		Provisional filing fee			
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1005 180 2005 80		Provisional filing fee																									
SUBTOTAL (1) (\$)		0.00																									
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE <table border="1" style="width: 100%; font-size: 0.7em;"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>1202 18 2202 9</td> <td></td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>1201 88 2201 44</td> <td></td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>1203 300 2203 150</td> <td></td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>1204 98 2204 44</td> <td></td> <td>**Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>1205 18 2205 9</td> <td></td> <td>**Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> </tbody> </table>		Large Entity	Small Entity	Fee Description	Fee Paid	1202 18 2202 9		Claims in excess of 20		1201 88 2201 44		Independent claims in excess of 3		1203 300 2203 150		Multiple dependent claim, if not paid		1204 98 2204 44		**Reissue independent claims over original patent		1205 18 2205 9		**Reissue claims in excess of 20 and over original patent			
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1205 18 2205 9		**Reissue claims in excess of 20 and over original patent																									
SUBTOTAL (2) (\$)		0.00																									
** or number previously paid, if greater. For Reissues, see above.																											
		Other fee (specify): _____ *Reduced by Basic Filing Fee Paid																									
		SUBTOTAL (3) (\$)																									
		1220																									

SUBMITTED BY		Complete if applicable	
Name (Print/Type)	Ramraj Sundararajan	Registration No. (Attorney/Agent)	53832
Signature	<i>Ramraj Sundararajan</i>	Telephone	(703) 838-7683
		Date	11/22/04

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PTO/SB/30 (09-04)

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Request for Continued Examination (RCE) Transmittal

Address to:
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Application Number	09/658,632
Filing Date	9/08/2000
First Named Inventor	Nimrod Megiddo
Art Unit	3629
Examiner Name	Jon Ouellette
Attorney Docket Number	ARC920000029US1

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.
Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. **Submission required under 37 CFR 1.114** Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).

- a. ☐ Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.

i. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____

ii. ☐ Other _____

- b. ☒ Enclosed

i. ☒ Amendment/Reply

iii. ☐ Information Disclosure Statement (IDS)

ii. ☐ Affidavit(s)/ Declaration(s)

iv. ☐ Other _____

2. **Miscellaneous**

- a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)

- b. ☐ Other _____

3. **Fees** The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.

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- a. ☒ RCE fee required under 37 CFR 1.17(e)

i. ☐ Extension of time fee (37 CFR 1.136 and 1.17)

ii. ☐ Other _____

- b. ☐ Check in the amount of \$ _____ enclosed

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Signature	<i>Ramraj Soundararajan</i>	Date	11/22/2004
Name (Print/Type)	Ramraj Soundararajan	Registration No.	53832

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Signature		Date	
Name (Print/Type)			

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for
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Transmittal**Address to:
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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	09/658,632
Filing Date	9/08/2000
First Named Inventor	Nimrod Megiddo
Art Unit	3628
Examiner Name	Jon Quellette
Attorney Docket Number	ARC920C00029US1

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Signature	<i>Ramraj Sundararajan</i>	Date	11/22/2004
Name (Print/Type)	Ramraj Sundararajan	Registration No.	53832

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